

MIDD 2 Initiative PRI-07: Mental Health First Aid (NEW)

How does the program advance the adopted MIDD policy goals?

This program primarily addresses the adopted MIDD policy goal of “improve health and wellness of individuals living with behavioral health conditions.”

Each year, about one in five Americans experiences a mental illness.⁴³ Many people are reluctant to seek help or might not know where to turn for care. Many people in society remain uninformed or fearful about the signs and symptoms of mental illnesses. Just as CPR training helps a person with no clinical training assist an individual following a heart attack, Mental Health First Aid training helps a person assist someone experiencing a mental health crisis such as contemplating suicide. In both situations, the goal is to support an individual *until appropriate professional help arrives*.

Mental Health First Aid is intended for all people and organizations that make up the fabric of a community.⁴⁴

1. Program Description

◇ A. Service Components/Design (Brief)

Mental Health First Aid is an 8-hour training course that gives people the skills to help someone who is developing a mental health problem or experiencing a mental health crisis. Funded by MIDD, Mental Health First Aid would be available to a variety of audiences, including: health and human services providers; employers and business leaders; faith community leaders; college and university staff and faculty; law enforcement and public safety officials; veterans and family members; persons with mental illness-substance use disorders and their families; and other caring citizens.

Mental Health First Aid trainees learn a 5-step strategy that includes assessing risk, respectfully listening to and supporting the individual in crisis, and identifying appropriate professional help and other supports. Participants are also introduced to risk factors and warning signs for mental health or substance use problems, engage in experiential activities that build understanding of the impact of illness on individuals and families, and learn about evidence-supported treatment and self-help strategies.

The initiative service components will include a combination of direct Mental Health First Aid trainings and “train the trainer” courses, with the numbers of each type of training to be determined by community capacity and interest. The County will act as a convener and organizer and leverage existing resources and momentum to create a community wide mental health first aid response.

⁴³ Any Mental Illness (AMI) Among Adults. (n.d.). Retrieved December 11, 2015, from <http://www.nimh.nih.gov/health/statistics/prevalence/any-mental-illness-ami-among-adults.shtml>

⁴⁴ Mental Health First Aid Frequently Asked Questions. (n.d.). Retrieved December 11, 2015, from <http://www.mentalhealthfirstaid.org/cs/faq/>

◇ *B. Goals*

The goal of this project is to make Mental Health First Aid as common as CPR in King County community. Giving more people in the community the basic tools to recognize and respond to emergent mental health crises will increase the likelihood of useful interventions from a person's natural support system during a behavioral health crisis. In addition, having more people throughout the county who become knowledgeable about psychiatric conditions will ultimately reduce stigma for individuals with these conditions.

This program supports a population health approach to behavioral health and aims to improve the overall health of the population and promote wellness in the region by intervening earlier.

◇ *C. Preliminary Performance Measures (based on MIDD 2 Framework)⁴⁵*

1. *How much? Service Capacity Measures*

Given current funding levels and national estimates of average costs of Mental Health First Aid training per person, 2,000 people per year minimum will be trained. This number may change based on the number of direct trainings offered, train the trainer courses conducted and the ability to leverage local funds.

2. *How well? Service Quality Measures*

- Improved perception of health and behavioral health issues and disorders

3. *Is anyone better off? Individual Outcome Measures*

- Improved perception of health and behavioral health issues and disorders

◇ *D. Provided by: Contractor*

Procurement and contracting for implementation of Mental Health First Aid training calendar and trainings will be explored in consultation with partners. Most or all trainings are expected to be provided by contractors.

⁴⁵ Throughout 2017, review and refinement of Results-Based Accountability (RBA) performance measures for MIDD 2 initiatives will be conducted whenever applicable, in consultation with providers. Updates to performance measures that may result from this collaborative process will be reported in the next MIDD Annual Report in August 2018.

2. Spending Plan

Year	Activity	Amount
2017	Mental Health First Aid trainings to communities and certification courses	\$300,000
2017 Annual Expenditure		\$300,000
2018	Mental Health First Aid trainings to communities and certification courses	\$307,800
2018 Annual Expenditure		\$307,800
Biennial Expenditure		\$607,800

This spending plan is revised from the 2016 SIP spending plan. It increases spending in this initiative by \$202,600 with a commensurate decrease in spending for the PRI-06 Zero Suicide Pilot initiative.

3. Implementation Schedule

◇ A. Procurement and Contracting of Services

King County BHRD will contract with providers for much of this work although some training may be conducted by existing King County staff. Specific components of procurement for this initiative will be determined following community engagement activities.

◇ B. Services Start date (s)

Services are expected to begin in September 2017.

4. Community Engagement Efforts

The County is collaborating with the National Council for Behavioral Health to capitalize on work already occurring in the community. Stakeholders and partners will continue to be consulted as design and implementation proceed. The County will convene behavioral health stakeholders to inform and develop the program components. They will consult, in part, about their willingness and capacity to have staff trained as facilitators. Staff will also conduct outreach to entities such as school districts and law enforcement agencies about their interest in hosting or attending these trainings.